



**City of Lodi - Single Household Alternative Rate for Energy (SHARE) Program**  
Single Family Program



**CITY OF LODI CUSTOMER INFORMATION**

*Please Type or Print*

City of Lodi Customer of Record Account Number – (for example 12345)

Name – As it appears on your City of Lodi Bill

Home Address – Do NOT Use a P.O. Box

Mailing Address – If different from above address

Daytime Telephone Number – Please indicate Area Code

Number of People Living in Household

**SHARE PROGRAM GUIDELINES**

- ✓ Applicant must be the City of Lodi Customer of Record.
- ✓ Applicant may not be claimed as a dependent on another person's tax return.
- ✓ Applicant must attach to this application documentation showing that current income for all people living in the home does not exceed the income guideline limits. Application is considered incomplete without this documentation. (See Instruction Sheet for examples of Proof of Income).
- ✓ Applicant must notify the City of Lodi Finance Department within 30 days of becoming ineligible for SHARE.

**HOUSEHOLD INCOME INFORMATION: (Proof of Income Must Be Included With Your Application)**

SHARE "Gross Yearly Income of Household" means all money and non-cash benefits, available for living expenses, from all sources, both taxable and non-taxable, before deductions for all people who live in my home. This includes, but is not limited to: Wages, salaries and commissions; Self-employment; Child/spousal support; Interest dividends or withdrawals from savings accounts, stocks and bonds, or retirement accounts such as IRA and 401K accounts; Stocks; Bonds; Business or rental income, support from family or friends; Cash gifts, loans; Lottery winnings; Tax refunds and money from insurance policies or legal settlements; Social Security; Retirement, veterans, disability or unemployment benefits and workers compensation; AFDC; SSI; SSP; Cash public assistance; Food Stamps and free housing or utilities; School grants, loans scholarships, or other aid.

**GROSS YEARLY INCOME OF HOUSEHOLD**

|               |          |                                 |                 |
|---------------|----------|---------------------------------|-----------------|
| AFDC          | \$ _____ | + Pensions / Annuity            | \$ _____        |
| + Food Stamps | \$ _____ | + Wages                         | \$ _____        |
| + SSI / SSP   | \$ _____ | + Interest Income               | \$ _____        |
| + SSA         | \$ _____ | + Other Money used to Pay Bills | \$ _____        |
|               |          | <b>= Total Income</b>           | <b>\$ _____</b> |

**DECLARATION (Please Read Carefully and Sign Below)**

By signing below, I certify under penalty of perjury that the above provided information is true and correct under the laws of the State of California. I understand that the City of Lodi reserves the right to request verification of continued economic need at any time, and I will notify the City of Lodi Finance Department of any changes that affect my eligibility. I understand that the City of Lodi has the right to re-bill me at the applicable rate if appropriate. I understand that this information may be shared with my other energy utility, if applicable.

**X**

City of Lodi Customer of Record Signature

? check if guardian or power of attorney

DATE

**CITY OF LODI CUSTOMER SERVICES**

**209-333-6719**



## City of Lodi - Single Household Alternative Rate for Energy (SHARE) Program Single Family Program

### **SHARE Program Instruction Sheet**

Enclosed is an application for the Single Household Alternate Rates for Energy (SHARE) Program. This program provides for a monthly discount of 20% on your City of Lodi Electric Bill. The City of Lodi will use the completed application, along with income documentation you provide, to determine if your household meets the following income guidelines. Should you qualify, your discount will appear as soon as practicable after the completed application has been received and verified. The City of Lodi will occasionally contact you to verify that your need for the program hasn't changed.

### ***SHARE INCOME GUIDELINES***

Your household's gross income must not exceed the SHARE Income Guidelines

| <b><u>Number of Persons in Household</u></b> | <b><u>Maximum Annual Household Income</u></b> |
|--|---|
| 1-2  | \$ 22,000                                     |
| 3  | \$ 25,900                                     |
| 4  | \$ 31,100                                     |
| Each additional member                       | \$ 5,200                                      |

#### **Proof of Income**

*The City of Lodi will use documentation you provide to determine whether your household qualifies under the income guidelines listed above. You must submit **CURRENT PROOF OF INCOME** for everyone receiving money in your household. Your application is considered incomplete without this documentation. The City of Lodi will contact you for updated income information if your documentation is incomplete, or not current.*

The following are some examples of documentation you can submit as proof of your household income:

- **Agency Assistance:** Intake documentation from local agency showing household income and agency contact information.
- **Aid to Families with Dependent Children (AFDC):** Notice of Action; Computer printout; Benefit letter; Copy of check.
- **Child and/or Spousal Support:** Copy of check.
- **Disability Compensation:** Copy of current check; Printout from agency or insurance company verifying amount.
- **Federal Tax:** Form 1040 and accompanying worksheets (Schedule C, F, and Form 2555); Forms W-2 for all wage earners.
- **General Assistance:** Notice of Action from County Social Services; Copy of current check.
- **Interest Income:** Monthly or quarterly bank statement; Statement of interest income from bank or agency.
- **Pay Check Stubs:** Current stub(s) covering at least two months and showing gross income.
- **Pension and Annuities:** Copies of current check; Annual statement from pension plan.
- **Self-employed:** Federal Tax Forms 1040 and Schedule C; Two recent bank statements showing personal income.
- **Social Security:** Copy of current check(s); Notification from bank of direct deposit.
- **Supplemental Security Income (SSI):** Notice of Planned Action; Notification from bank of direct deposit.
- **Supplemental Security Payment (SSP):** Notice of Planned Action; Notification from bank of direct deposit.
- **Student Aid:** Financial Aid statement from College or University.
- **Support from an individual:** Copy of check and statement signed by person providing support.
- **Unemployment Benefits:** Copy of current check; Printout from Employment Development Department.
- **Veteran's Benefits:** A letter indicating receipt of Veteran's Pension; Copy of VA check.
- **Other Sources of Income:** Documentation of other money received by your household and used to pay your monthly bills.

**PLEASE NOTE: Unaltered documents should be submitted. Originals can not be returned.**